

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katheryne Harris Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership SP Boynton Beach, L.P.		1a. DOCUMENT # B98000000391	
Mailing Address Route 1, Box 108A Aubrey, Texas 76227		Principal Office Address Route 1, Box 108A Aubrey, Texas 76227	
2. Mailing Address		2a. Principal Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip Country		Zip Country	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 APR -5 PM 3:30

3. Date of Current Registration 6/12/98	5a. Capital Contributions 625,000
3a. Date of Last Report	5b. Amount of Capital Contributions in FL (Other)
4. State or Country of Formation Texas	3,520
6. Filing Number 62-1747211	☐ Applied For ☐ Not Applicable
7. Certificate of State Disclosed	☐ \$8.75 Annual Fee Required
8. Monies Payable to Dept. of State (See reverse side for fee schedule)	

9. Name and Address of Current Registered Agent CT Corporation System 1200 South Pine Island Road Plantation, Florida 33324	10. Filing Agent's Registered Agent's Office Name Street Address (P.O. Box Number is Not Allowed) Suite, Apt. #, etc. City FL Zip <i>MDA</i>
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10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above named limited partnership is registered or re-registered under the laws of the State of Florida, subject to the act and for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s) if one by accepting the appointment of the registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s) Sirrom Corporation	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) Route 1, Box 108A	11b. City, State & Zip Code Aubrey, Texas 76227	11c. Registration Number (Do NOT Use Post Office Box Numbers) F98000003567
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*****141.25 *****141.25

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information is approved and deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate, and that my signature shall have the same legal effect as if made under oath. I further certify that I am a General Partner of the limited partnership, executor or trustee, empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE

Typed or Printed Name of General Partner Signing Form

John A. Morris, Sr.

Daytime Telephone Number

4/1/99
615-665-4448

CR2E003 (12/98)